| | | | | | | | Application or Docket Number | | | | | | |
|-------------|--|--|---------------------------------|-----------------|---|---------------------------------------|------------------------------|--------------------|-------|-----------------------|-------|---------------------|-----------------------------------|
| | PATENT | APPLI | | ON FEE D | RD | RD 09/509234 | | | | | | | |
| | | ÷: | SMAL | | MITY MITY | | OTHER SMALL | R THAN LENTITY | | | | | |
| F | OR | | NUMB | ER FILED | NUMBE | R EXTRA | | RATE | | FEE | 7 | RATE | FEE |
| B/ | ASIC FEE | | | | | | | | T | 380.00 | OR | | 840 |
| π | OTAL CLAIMS | | 20 minus 20= * | | | | | X\$ 9= | | | OR | X\$18= | |
| IM | DEPENDENT C | ZAIMS | 2 | minus | 3= * | | 1 | X39= | 1 | | OR | \ | 1 |
| M | JUTIPLE DEPE | NDENT (| CLAIM PRESENT | | | | | +130= | _ | | OR | | 1 |
| • # | * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | _ | | OR | | 947 |
| | CLAIMS AS AMENDED - PART II | | | | | | | | - | | | OTHER | • |
| | • | | umn 1) | | (Column 2) | (Column 3) | 1. F | SMAL | | | OR | SMALL | |
| ENTA | | REMA | AIMS AINING TER IOMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | Π | ADDI- IONAL FEE | | RATE | ADDI- TIONAL FEE |
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| SE | Independent | • | | Minus | 444 | • | ľ | X39= | 7 | | OR | X78= | |
| _ | FIRST PRESE | OTATIO | N OF M | JLTIPLE DEP | PENDENT CLA | iM · | ľ | +130= | 1 | | | +260= | |
| | • | | | | | | L | +130= TOTA | | | OR | TOTAL | |
| | | | - | . : | 01 | | . 4 | DOIT. FE | | 1 | JOR , | ADDIT. FEE | |
| | f | CLA | AMS | 130 m | (Column 2) HIGHEST | (Column 3) | r | - · · | 4 | | 7 | | T 4000 |
| AMENDMENT B | | REMA | AINING | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | 1 | RATE | TK | ODH- ONAL FEE | | RATE | ADDI- TIONAL FEE |
| 2 | Total , | • 45.47 | \$1.5T | Minus | • | | | X\$ 9= | | | OR | X\$18= | |
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| | | | | | | | | TOTAL DOIT, FEE | | 14. j | OR | TOTAL ADOIT, FEE | |
| | | (Colur | .mn <u>1)</u> | | (Column 2) | (Column 3) | | | | | | | |
| ENTC | | REMA | UMS UNING TER DMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT | | RATE | TIC | DDI- ONAL FEE | | RATE | ADDI- TIONAL FEE |
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| ٢ | FIRST PRESE | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + | | OR | | |
| • 1 | I the entry in colum | 4 le le | | in make | | antima 4 | | +130= | | | OR | +260= | <u> </u> |
| 1 | K the "Highest Nur | rmber Prev | viously Pai | ll for in this | S SPACE is less t | han 20. enter "20." . | W | TOTAL DOTT, FEE | | v: *: | OR , | TOTAL ADDIT FEE | |
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